



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

742407-4

CERTIFICATE OF MAILING OR  
TRANSMISSION  
[37 CFR 1.8(a)]

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop \_\_\_\_\_, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at \_\_\_\_\_, on \_\_\_\_\_.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

In re Application of **Daniel David YOUNG**Application Number **09/270,688**Filed **03/16/1999**For **METHOD AND SYSTEM FOR FORMING CUSHION SHOE INSOLES**Group Art Unit **3722**Examiner **Erica E. CADUGAN**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows  
(check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) - (\$60/\$120) \$ \_\_\_\_\_
- ☐ Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) \$ \_\_\_\_\_
- ☒ **Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) \$ 510.00**
- ☐ Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) \$ \_\_\_\_\_
- ☐ Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) \$ \_\_\_\_\_

☒ Applicant claims small entity status.☐ A check to cover the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380.  
I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

  
\_\_\_\_\_  
Signature

June 8, 2006

Date

Corinne R. Gorski

Typed or printed name

(202) 585-8000

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 2 forms are submitted.

SEND TO: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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